PTO/SB/82 (01-06)
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ļ			Applicat	ion Number	10/552,56	32-Co	nf. #2564		
REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS			Filing Date		October 11, 2005				
			First Na	First Named Inventor Ljubo		ubomir Antoncic			
			Art Unit		1621				
			1	er Name	Not Yet Assig		ed		
			Attorney	Docket Number	21388/02				
I hereby revoke all previous powers of attorney given in the above-identified application.									
	A Power of Attorney is submitted herewith.								
OR									
"" ت	X I hereby appoint the practitioners associated with the Customer Number: 07278								
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The address associated with									
OR	Custom	ner Number:		07278					
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X Ap	X Applicant/Inventor.								
Assignee of record of the entire interest. See 37 CFR 3.71.									
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)									
SIGNATURE of Applicant or Assignee of Record									
Signature / / / / / / / / / / / / / / / / / / /									
Name Ljubemit Anjoncic									
Date	Date 26.03 2008 Telephone								
NOTE: S forms if m	NOTE: Signatures of all the inventors or assignces of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
X	X *Total of 3 forms are submitted.								

10/552,562-Conf. #2564

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Application Number

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			[Art Uni				
			Examir	iner Name Not Yet A		ssigned		
				Attorne	y Docket Number	21388/02	09170)-US0
I hereby revoke all previous powers of attorney given in the above-identified application.								
OR		attorney is submitted here		d with t	ne Customer Nu	mber:	07	' 278
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	Application Number	10/552,562-Conf. #2564		
REVOCATION OF POWER OF	Filing Date	October 11, 2005		
ATTORNEY WITH NEW POWER OF ATTORNEY	First Named Inventor	Ljubomir Antoncic		
AND	Art Unit	1621		
CHANGE OF CORRESPONDENCE ADDRESS	Examiner Name	Not Yet Assigned		
	Attorney Docket Number	21388/0209170-US0		
I hereby revoke all previous powers of attorney g	liven in the above-identif	led application.		
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X Please change the correspondence address for the above-identified application to:								
The address associated with Customer Number: 07278								
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Telephone	ne Email							
I am the: X Applicant/Inventor.								
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature	Clarge							
Name	Anton Copar							
Date		3. 2001			Telephone		1-7217 -370	
NOTE: Signatures of all the inventors or assignces of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
Total of 3 forms are submitted.								